Adult Environmental Emergencies: Near Drowning/Cardiopulmonary Arrest

I. All Provider Levels

1. If possible and if safe to do so, remove patient from the water.

> ***Note Well:*** *Enter water only if trained and only as a last resort. Attempt to reach, throw or go with assistance first.*

2. Refer to the Trauma Assessment Protocols.

> ***Note Well:*** *In incidents involving diving injuries, suspect C-spine compromise and treat accordingly.*

3. If spontaneous respirations are present, administer high-flow oxygen as appropriate.

4. If spontaneous respirations or circulation are absent, initiate CPR with BVM and 100% oxygen.

   A. Attach AED and analyze rhythm.

> ***Note Well:*** *Patient should be removed from the water and dried off before utilizing the AED/Manual Defibrillator. Make sure water does not complete circuit between patient and providers.*

> ***Note Well:*** *EMT-I and EMT-P should use monitor-defibrillator.*

   B. Defibrillate patient with AED.

> ***Note Well:*** *EMT-I and EMT-P should use manual defibrillator.*

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I. All Provider Levels (continued)

C. Initiate advanced airway management with Combi-tube if respiratory effort is inadequate.

> ***Note Well:*** *EMT-I and EMT-P should use ET intubation.*

5. Establish large bore IV access with normal saline.

II. Advanced Life Support Providers

1. Administer 1.0 mg Epinephrine 1:10,000 IVP every 3 - 5 minutes for the duration of the arrest.

> ***Note Well:*** *EMT-I and EMT-P should administer 2.0 mg Epinephrine 1:1,000 in 8 cc of normal saline via ET if IV access is unobtainable.*

> ***Note Well:*** *Epinephrine is not to be administered via the Combi-tube.*

2. If patient remains in cardiopulmonary arrest following 2 doses of epinephrine consider administering Sodium Bicarbonate 1.0 mEq/kg IVP *(Medical Control Option Only)*

> ***Note Well:*** *Drowning - cardiac arrest patients can be considerably acidotic*

3. Continuous cardiac monitoring

A. Referring to the appropriate dysrhythmia algorithm as needed.

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III. Transport Decision

1. Transport to closest open trauma center.

IV. The Following Options are Available by Medical Control Only

1. Sodium Bicarbonate, 1.0 mEq/kg IVP

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